APPLICATION DATA SHEET

Application Information

Application Number::

To be assigned

Filing Date::

Herewith

Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form

(CFR)?::

Number of Copies of CFR::

Title::

Attorney Docket Number::

40732-215150

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 9

Small Entity?::

YES

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type::

Primary Citizenship::

United States of America Country:: Status:: **Full Capacity** Given Name:: Majid Middle Name:: Family Name:: Shahbazi Name Suffix:: City of Residence:: Fairfax **State or Province of Residence::** Virginia **Country of Residence::** United States of America **Street of Mailing Address::** 13119 Misty Glen Lane City of Mailing Address:: Fairfax State or Province of Mailing Virginia Address:: **Country of Mailing Address::** United States of America Postal or Zip Code of Mailing 22033 Address:: **Applicant Authority Type::** Inventor **Primary Citizenship::** United States of America Country:: United States of America Status:: **Full Capacity** Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence:: Country of Residence:: United States of America **Street of Mailing Address::**

Inventor

United States of America

City of Mailing Address::	
State or Province of Mailing Address:: Country of Mailing Address::	United States of America
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	
State or Province of Mailing Address::	
Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name.	

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing

Address::

Country of Mailing Address::

Postal or Zip Code of Mailing

Address::

Correspondence Information

Correspondence Customer

26694

Number::

Phone Number::

202-344-4000

Fax Number::

202-344-8300

E-Mail Address::

rsbabayi@venable.com

Representative Information

Representative Customer

26694

Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	National Stage of	PCT/US2003/026645	August 27, 2003
PCT/US2003/026645	Claims Priority from	60/406,032	August 27, 2002

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::

Trust Digital, LLC

Street of Mailing Address::

7900 Westpark Drive, Suite A50

City of Mailing Address::

McLean

State or Province of Mailing

Virginial

Address::

Country of Mailing Address::

United States

Postal or Zip Code of Mailing

22102

Address::

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